2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2007
Secretary of State

DOCUMENT# P99000022229

Entity Name: NEW HOPE NATURAL HEALING CENTER, INC.

Current Principal Place of Business:

2101 TAMIAMI TR C
PORT CHARLOTTE, FL 33948

New Principal Place of Business:

2101 TAMIAMI TR
PORT CHARLOTTE, FL 33948

Current Mailing Address:

P O BOX 380878
MURDOCK, FL 33938

New Mailing Address:

FEI Number: 65-0879593 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WARD, DARLENE R
2101 TAMIAMI TR C
PORT CHARLOTTE, FL 33948 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: WARD, DARLENE R
Address: 2101 TAMIAMI TR C
City-St-Zip: PORT CHARLOTTE, FL 33948

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: WARD, DARLENE R
Address: 2101 TAMIAMI TR
City-St-Zip: PORT CHARLOTTE, FL 33948

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DARLENE R WARD P 03/14/2007

Electronic Signature of Signing Officer or Director Date